



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9361

<b>SERIAL NUMBER</b> 10/749,821	<b>FILING OR 371(c) DATE</b> 12/31/2003 <b>RULE</b>	<b>CLASS</b> 264	<b>GROUP ART UNIT</b> 1732	<b>ATTORNEY DOCKET NO.</b> S63.2-11032-US01
------------------------------------	---	---------------------	-------------------------------	--

## APPLICANTS

Robert E. Burgmeier, Plymouth, MN;  
Richard Goodin, Blaine, MN;  
Joseph Delaney JR., Minneapolis, MN;  
Larry Peterson, Champlin, MN;

\*\* CONTINUING DATA \*\*\*\*\*

N/A Mah

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

N/A Mah

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

05/03/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature: <i>Monica Schuman</i> Initials: <i>Mah</i>			

## ADDRESS

490

## TITLE

Medical device with varying physical properties and method for forming same

<b>FILING FEE RECEIVED</b> 1208	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	---